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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09/890076	FILED DATE
APPLICANT(S)								
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DER.	IND.	DER.	IND.	DER.		
1							51	
2							52	
3							53	
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43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	7		2				TOTAL IND.	
TOTAL DER.	37		21				TOTAL DER.	
TOTAL CLAIMS	44		23				TOTAL CLAIMS	

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

FORM PTO-1360 (REV. 3-78)

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